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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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-08/04/97--01168--018
*****78.75 *****78.75

SUBJECT: CHOICE HOLDINGS, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Geoff C. Wilcox
Name (Printed or typed)

5025 Ginnie Court
Address

Spring Hill, FL. 34608
City, State & Zip

(352) 596-0766
Daytime Telephone number

97 AUG -4 PM 5:03
RECEIVED
DIVISION OF CORPORATIONS
DEPT. OF STATE

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CHOICE HOLDINGS, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

155 S.E. Hwy. 19
Crystal River, FL. 34429

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Geoff C. Wilcox
5025 Ginnie Court
Spring Hill, FL. 34608

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Geoff C. Wilcox
5025 Ginnie Court
Spring Hill, FL. 34608



Signature/Incorporator

August 4, 1997

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent

August 4, 1997

Date

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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